



APPLICATION FOR ROOF PERMIT

Permit Number _____

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."
PLEASE PRINT:

The undersigned hereby applies for a permit to make roof installations as indicated below on property.

Project Address	
Owner's Name	
Owner's Phone #	

Project Address: _____

Owner Name: _____

Phone No.: (_____) _____ - _____

Owner Address: _____

Class of Building (Please check all applicable classes)			
<input type="checkbox"/>	New Construction	<input type="checkbox"/>	Existing Structure
<input type="checkbox"/>	Residential	<input type="checkbox"/>	Commercial
<input type="checkbox"/>	Manufactured Housing	<input type="checkbox"/>	Other *List type

Permit valuation greater than \$2500 requires a notarized Page 2, and Notice of Commencement prior to the first inspection.

Please complete the information below:

Nature of Work (Check one)

☐ New ☐ Re-roof ☐ Re-covering

Roof Square Footage _____

Number of Stories _____

Type Covering (Check one)

☐ Asphalt Shingles ☐ Built-up ☐ Metal ☐ Wood Shingles/Shake

☐ Modified Bitumen ☐ Other _____

☐ Tile MFG _____

NTRMA/FRSA System (Check one)

☐ One ☐ Two ☐ Three ☐ Four (a) ☐ Four (b)

Comment:

Total Job Valuation: \$ _____

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any Applicable codes and/or ordinances. I hereby certify that the above is true and correct to the best of my knowledge.

PLEASE PRINT: (Check one) Owner: Contractor:

Name of License Holder/Agent: _____

Contractor License Number (if applicable): _____

Contact Phone Number: (____) ____ - _____

Authorized Signature: _____

NOTE: The Building Permit Number is required if the Mechanical Installation is associated with any construction or alteration where a Building Permit has been issued.